ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INTIALS	ID NO.	DATE
FEE DETERMINATION		19	112 40
O.I.P.E. CLASSIFIER		17:01	11/16/0
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INDEX OF CLAIMS

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50	100	<u> </u>	
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If more than 150 claims or 10 actions staple additional sheet here

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